The Medical Home: a Role in Reducing Parenting Stress

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Parent Stress and Children's Health

- Countless articles describing increased stress among parents of children with special needs.
- Lack of information about positive benefits of having a medical home.
- Bidirectional relationship
 - Child behavior affects parent stress
 - Parent stress affects child behavior

Parent Participation Program

- Resides within Michigan's CSHCS program
- Developed in 1988 an innovative practice
- Parents of CSHCN
 - Represent families on Title V administrative team
 - Act as consultants for other parents
 - Help shape program policies and procedures for parents

Objectives

- What health-related factors are associated with parenting stress in Michigan?
- Do parents of children with a medical home experience less parenting stress than parents of children without a medical home?
- What medical home dimensions are associated with less parenting stress?

Study Design

- Cross-sectional
 - 2003 National Survey of Children's Health
 - Telephone survey (SLAITS)
 - Michigan population, N=2,191 respondents
- Analysis
 - SAS v9.1, using survey procedures
 - Polytomous logistic regression

CSHCN Definition

- FACCT Screener used in 2001 National Survey of CSHCN
- Series of 3 questions for each of 5 needs
 - Does the child have * need?
 - Does this need require health services more than the typical child?
 - Is the condition expected to last beyond the next 12 months?

Medical Home

- o The Seven C's
 - aCcesible
 - Continuous
 - Comprehensive
 - Family-Centered
 - Coordinated
 - Compassionate
 - Culturally effective

CAHPS-CCC Framework for Medical Home

- Personal Doctor or Nurse (PDN)
 - Child has one or more persons whom the parent considers to be the child's personal doctor or nurse
- Coordinated Care
 - PDN helped direct the parent to specialty care for the child when it was needed
 - PDN helped direct the parent to special services, equipment, or counseling for the child when it was needed
 - PDN discussed special care or equipment that was needed

CAHPS-CCC Framework for Medical Home

- Family-Centered Care
 - PDN spends enough time with the child
 - PDN explains things understandably to the parent
- Accessible Care
 - Parents are able to get advice from the PDN over the telephone
 - Child is able to get care when wanted for illness or injury
- Culturally-sensitive Care
 - Interpreter was available for the child when needed

CAHPS-CCC Framework for Medical Home

- Comprehensive Care
 - Child was able to get specialty care when needed
 - Child was able to get special services, equipment, or counseling when needed
 - Child was able to get prescription medications when needed
 - Child was able to get mental health services when needed
 - Child was able to get medical care when needed
 - Child received preventive care in the past twelve months

Parent Aggravation Scale

- Four-question scale to classify parents with low, moderate, or high levels of parenting stress
 - Child is much harder to care for than most children?
 - Child does things that really bother you a lot?
 - Giving up more of your life to meet your child's needs than you ever expected?
 - Felt angry with your child?

Parenting Stress Prevalence

- Parents of 10.5% of children report high stress levels associated with parenting
- 'High' parent stress prevalence increased...
 - With decreasing income
 - With decreasing education
 - With increasing child age
 - Among single adult households

Parenting Stress and Health Needs

	High Aggravation (%)	Moderate Aggravation (%)	Low Aggravation (%)
CSHCN	19.8	70.5	9.7
Behavioral Need	43.5	51.6	4.9
Other Need	11.2	77.4	11.4
Not CSHCN	8.0	74.8	17.2
Health Insurance			
Private	7.8	76.4	15.8
Medicaid	18.3	65.3	16.4
Uninsured	7.3	83.1	9.6
Michigan	10.5	73.9	15.6

Parent Stress and the Medical Home

		High Aggravation (%)	Moderate Aggravation (%)	Low Aggravation (%)
	Medical Home	6.2	76.2	17.6
C	omprehensive Care	8.4	75.6	16.0
	Coordinated Care	14.5	74.1	11.4
	Family-Centered	8.5	74.1	17.3
	Accessible Care	9.0	74.5	16.4
	Personal Doctor	9.7	74.5	15.7
	Michigan	10.5	73.9	15.6

Parent Stress and Medical Home

	High vs. Moderate Aggravation OR* (95% CI)	Low vs. Moderate Aggravation OR* (95% CI)	P-value
Child has special needs	2.6 (1.8-3.9)	0.8 (0.5-1.2)	<0.0001
Child has a medical home	0.5 (0.3-0.8)	1.2 (0.9-1.6)	0.0008
Parent has support	0.4 (0.2-0.6)	1.4 (0.7-2.8)	0.0002
By Age of the Child			
Age 12 to 17 vs. 0 to 5	1.0 (0.6-1.6)	0.3 (0.2-0.5)	<0.0001
Age 6 to 11 vs. 0 to 5	0.8 (0.5-1.3)	0.4 (0.3-0.6)	
By Health Insurance			
No Insurance	0.7 (0.3-1.6)	0.5 (0.2-1.1)	0.0089
Public Insurance	1.9 (1.2-3.1)	0.8 (0.5-1.3)	
Private Insurance	Reference	Reference	

^{*}Adjusted for race, gender, poverty level, number of adults in household

Parenting Stress and Medical Home Dimensions

	High vs. Moderate Aggravation OR* (95% CI)	Low vs. Moderate Aggravation OR* (95% CI)	P-value
Comprehensive Care	0.9 (0.6-1.4)	0.9 (0.7-1.4)	0.8598
Coordinated Care	1.3 (0.7-2.3)	1.0 (0.5-1.9)	0.7543
Family-Centered	0.6 (0.4-1.0)	1.5 (1.0-2.4)	0.0146
Accessible Care	0.9 (0.4-2.1)	0.7 (0.3-2.0)	0.8034
Personal Doctor	0.6 (0.4-1.0)	1.1 (0.7-1.7)	0.1402

^{*}Adjusted for age, race, gender, poverty, insurance, special need, number of adults in household, help with parenting

Behavioral Needs and the Medical Home

	Behavioral Need % (SE)	Other Special Need % (SE)
*Medical Home	10.6 (3.0)	45.1 (3.3)
*Comprehensive Care	29.7 (5.1)	75.8 (3.0)
Coordinated Care	37.0 (6.3)	51.3 (3.3)
Family-Centered	78.6 (4.9)	83.3 (2.8)
Accessible Care	86.2 (5.2)	91.1 (2.4)
Personal Doctor	93.5 (2.9)	94.2 (1.3)

^{*}p < 0.05

Behavioral Needs and Parenting Stress

	High vs. Moderate Aggravation OR* (95% CI)	Low vs. Moderate Aggravation OR* (95% CI)	P-value
By Special Need			<0.0001
Behavioral need	6.9 (3.7-12.9)	0.6 (0.2-2.0)	
Other special need	1.4 (0.9-2.4)	0.8 (0.5-1.2)	
Child has a medical home	0.6 (0.4-0.9)	1.2 (0.9-1.6)	0.0165

^{*}Adjusted for age, race, gender, poverty level, insurance, number of adults in household, help with parenting

Grouping of special needs children may bias conclusions!

Study Limitations

- Medical home definitions vary by study
- Needs of children vary, thus the medical home has a different meaning for every child
- Outcome may affect exposure-parent stress may lead to behavioral needs
- Sample size of CSHCN in the NSCH is limited-may not have enough power

Public Health Implications

- Involve parents in decision-making
 - Individual care
 - Programs and policy-making
- Obtaining care for children may not only be important for child health, but parental health
- Factors predicting family-centered care may help in reducing stress for parents of CSHCN

